(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200300325262

86/20/17--01024--003 **25.00

17 JUN 20 PM 3: 23

S. WARREN JUN 2 1 2017

COVER LETTER

	: Registration Se Division of Cor			
SUBJEC		Control LLC		
SUBJEC	1:	Name of Lim	ited Liability Company	 -
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspo	ndence concerning this matter	to the following:	
		Jose Tadeu C. Ferreira		
			Name of Person	
		Leaf, Ferreira, de Araujo, I	LLC	
			Firm/Company	
		100 SE 2nd Street, Suite 2,	330	
			Address	
		Miami, FL 33131		
			City/State and Zip Code	
		tferreira@leaflaw.com		
		E-mail address: ()	to be used for future annual report no	otification)
For further	er information c	oncerning this matter, please co	all:	
Jose Tado	eu C. Ferreira		305 373-0733	
	Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclosed	is a check for th	ne following amount:		
\$25.0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

1 Liability Company as it now appears on our records.	.)
A Florida Limited Liability Company)	-
bility Company were filed on May 24, 2017	and assigned
ving:	
the limited liability company here:	
rds "Limited Liability Company," the designation "LLC"	or the abbreviation "L.I.,C."
ble:	
ADDRESS)	
<u>OX)</u>	
Enter Florida street address	
Flo	rida
·	Zip Code
agent and agree to act in this capacity. I furth and complete performance of my duties, and cred agent as provided for in Chapter 605, Figistered office address, I hereby confirm that hange. If Changing Registered Agent. Signature of Page 1 of 3	I I am familiar with and S.S. Or, if this document is a the limited liability
	he limited liability company here: ds "Limited Liability Company," the designation "LLC" ole: ADDRESS) Carregistered office address on our records, ce address here: Enter Florida street address City gistered Agent: agent and agree to act in this capacity. I furnity and complete performance of my duties, and cored agent as provided for in Chapter 605, Figistered office address, I hereby confirm that hange. If Changing Registered Agent, Signature of

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added or removed from our records:

MGR = Manager '
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Alexandre Musumeci Suarez	100 SE 2nd Street, #2330, Miann, FL 35131	= Add
			□ Remove
			Change
			□ Remove
			Change
			🖸 Remove
			Change
			D Add
			□ Remove
			Change
		, 	□ Add
			□ Remove
			Add C
		FI ONDA	Remove
			🗆 Change

-							
-					.		
							
	_	_					
					·	_	
			<u> </u>				
				<u>_</u>			
		_					
ote: If the neument's erecord	date inserted in thi effective date on th	is block does no ne Department o nyed effective	t meet the applic ('State's records : date, but no	cable statutory filin	(opti nore than 90 days after ng requirements, thi time, at 12:01	is date will no	ot be listed
ote: If the neument's e record The 90th	date inserted in thi effective date on the specifies a dela	is block does no ne Department o nyed effective	t meet the applic ('State's records : date, but no	cable statutory filin	ng requirements, thi	is date will no	ot be listed
ote: If the neument's e record The 90th	date inserted in thi effective date on the specifies a dela iday after the	is block does not be Department of a year effective record is filed	t meet the applic f State's records e date, but no d.	ot an effective	ng requirements. thi	is date will no	ot be listed
ote: If the neument's e record The 90th	date inserted in thi effective date on the specifies a dela iday after the	is block does not be Department of a year effective record is filed	t meet the applic f State's records e date, but no d.	eable statutory filing.	ng requirements. thi	is date will no	ot be listed
ote: If the ocument's record	date inserted in thi effective date on the specifies a dela iday after the	is block does not be Department of a year effective record is filed	t meet the applic f State's records e date, but no d. 2017 2017 a member or auth	ot an effective	ng requirements. thi	is date will no	ot be listed

Filing Fee: \$25.00